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Reply to Non-Final Office Action (13 sheets)
Fee Transmittal Form (PTO/SB/17) (1 sheet)
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Application Number 09/736,430
Confirmation No.: 8766
Filing Date: 15 December 2000
Document Submission Date: 03 November 2008

Art Unit: 2617
Examiner: Contee, Joy Kimberly
Inventor: Cloutier, Jocelyn
Docket: 113592 (1014-087)

03 Nov 2008

Date

Kelly B. Smoker

Name of Certifier

Kelly B. Smoker

Signature of Certifier

Approved for use through 06/30/2010. UMS US1-0052

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/03/2004. Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818). FEE TRANSMITTAL For FY 2009		Complete If Known Application Number: 09/736,430 Filing Date: 15 December 2000 First Named Inventor: Cloutier, Jocelyn Examiner Name: Contee, Joy Kimberly Art Unit: 2617 Attorney Docket No.: 113592 (1014-087)	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		RECEIVED CENTRAL FAX CENTER NOV 03 2008	
TOTAL AMOUNT OF PAYMENT (\$) 130.00			

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: **50-2504** Deposit Account Name: **Michael N. Haynes**
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)
 Each independent claim over 3 (including Reissues)
 Multiple dependent claims

Total Claims - 20 or HP = 0 x 52 = 0
 HP = highest number of total claims paid for, if greater than 20.

Indep. Claims - 3 or HP = 0 x 220 = 0
 HP = highest number of independent claims paid for, if greater than 3.

Small Entity	
Fee (\$)	Fee (\$)
52	26
220	110
390	195
Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)
	0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = 0 / 50 = 0 (round up to a whole number) x 270 = 0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): First Month Extension

Fees Paid (\$)
0
130

SUBMITTED BY

Signature: <i>Michael N. Haynes</i>	Registration No. (Attorney/Agent):	Telephone:
Name (Print/Type):		Date: 03 Nov 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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